

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	TC 5-883	2/15/01 04-02-01
RESPONSE FORMALITY REVIEW	RB	1878	8/10/01 06/26/01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final Original	Date
1	✓	1/11/02
2	✓	12/12/02
3	✓	2/5/01
4	✓	3/22/01
5	N	
6	✓ ✓ ✓	
7	✓	
8	✓	
9	✓	
10	✓	
11	N	
12	✓ ✓ ✓	
13	✓	
14	N	
15	✓ ✓	
16	✓	
17	✓	
18	✓	
19	✓	
20	✓	
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27	✓	
28	✓	
29	✓	
30	✓	
31	N	
32	✓ ✓ ✓	
33	✓ ✓ ✓	
34	N	
35	✓ ✓ ✓	
36	✓	
37	✓	
38	✓	
39	✓	
40	✓	
41	✓	
42	✓	
43	✓	
44	✓	
45	✓	
46	✓	
47	✓	
48	✓	
49	✓	
50	✓	

Claim	Final Original	Date
51	✓	2/11/01
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Claim	Final Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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